

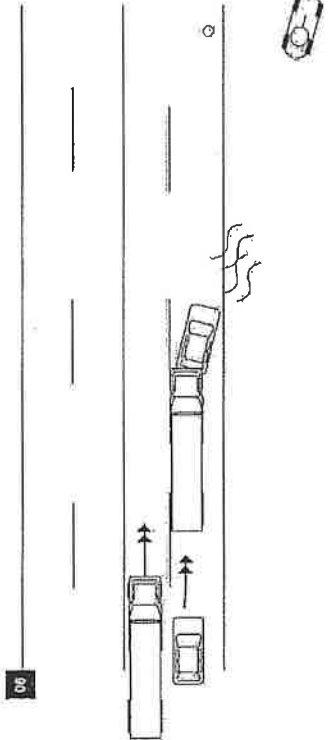
ILLINOIS TRAFFIC CRASH REPORT

Sheet 1 of 2 Sheets

[illegible]

EXHIBIT

B



NARRATIVE (Refer to vehicle by Unit No.,

Unit #1 and Unit #2 were eastbound on I70 at approximately 1/4 mile east of mile post 131. Unit #1 was traveling in the left, passing lane of I70. Unit #2 was traveling behind an unknown passenger vehicle behind Unit #1. A witness, Eugene Koprzynski was traveling by motorcycle on I70 behind all the Units. The witness stated that Unit #1 was traveling in the left, passing lane for over 2 miles, and wouldn't move over. He stated that the unknown passenger vehicle and Unit #2 attempted to pass Unit #1, at a high rate of speed, in the right, driving lane of I70. Unit #1 then came over into the right driving lane and struck Unit #2. A passenger/witness, Deborah Koprzynski did not see the crash, but did state that Unit #1 was driving in the left, passing lane for a long time, and wouldn't move over into the right, driving lane. Unit #1 driver stated the he was traveling eastbound on I70 and was passing another TT/ST, and he was in the left, passing lane. Unit #1 driver stated that he then attempted to enter into the right, driving lane of I70. Unit #1 driver then stated that Unit #2 appeared out of his blind spot and he struck Unit #2 in the rear driver's side. Unit #2 driver stated the she was following an unknown passenger car and they were in the right, driving lane of I70, driving at 65 m.p.h.. Unit #2 driver said that Unit #1 was in the left, passing lane and would not go over to the right, driving lane. Unit #2 driver then attempted to pass Unit #1. Unit #2 driver said the unknown passenger vehicle, in front of her Unit, passed Unit #2. Unit #1 then struck her unit in the rear driver's side. Unit #2 driver then lost control of her Unit and left the highway to the right and overturned. Unit #1 was pulling a 2006 Retinower semi trailer, bearing OK semi regl/6647FJ, Vin# F48A25R071716. The semi trailer was not damaged in the crash. At the crash scene I observed 4 separate tire friction marks (67'1", 64'3", 46'1" and 22'11" in length) starting at the white, eastbound fog line, 57'4" west of the reference point. The tire

LOCAL USE ONLY

U 1 Color	WHITE	U 2 Color	GRAY
U 1 Towed by / 10			

U 2 Towed by / '10 **Bennetts Wrecker Service / Bennetts Wrecke**

COMMERCIAL MOTOR VEHICLE (CMV)

IF MORE THAN ONE CMV IS INVOLVED, USE SR 1050A
ADDITIONAL UNITS FORMS.

A CMV is defined as any motor vehicle used to transport passengers or property and:

1. Has a weight rating of more than 10,000 pounds (example: truck or truck/trailer combination); or
2. Is used or designed to transport more than 15 passengers, including the driver (example: shuttle or charter bus); or
3. Is designed to carry 15 or fewer passengers and operated by a contract carrier transporting employees in the course of their employment (example: employee transporter – usually a van-type vehicle or passenger car); or
4. Is used or designated to transport between 9 and 15 passengers, including the driver, for direct compensation (example: large van used for specific purpose); or
5. Is any vehicle used to transport any hazardous material (HAZMAT) that requires placarding (example: placards will be displayed on the vehicle).

CARRIER NAME **MILLER TRUCK LINES LLC**
ADDRESS **4230 S ELWOOD**

CITY/STATE/ZIP TULSA / OK / 74107

USDOT NO. 125792 ILC NO.

Source of above info. ☐ Side of Truck ☒ Papers ☐ Driver ☐ Log Book

Gross Vehicle Weight Rating (GVWR) **80000**

Were HAZMAT placards displayed on the vehicle? ☐ Y ☒ N

Did HAZMAT spill from the vehicle (do not consider fuel from the vehicle's own tank)? ☐ Y ☒ N ☐ UNK

Did HAZMAT Regulations contribute to the crash?

Did Motor Carrier Safety Regulations (MCS) violation contribute to the crash?

Was a Driver/Vehicle Examination Report form completed?

HAZMAT	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	<input type="checkbox"/> UNKN	Out of Service?	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
MCS	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> UNKN	Out of Service?	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N

Form No. 3836070739

IDOT PERMIT NO. _____ WIDE LOAD? ☐ Y ☒ N
TRAILER WIDTH(S): 0-96" 97-102" > 102"

TRAILER 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRAILER 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TRAILER LENGTH(S): 1	<u>53</u>	ft	TRAILER 2	<u> </u>	ft
TOTAL VEHICLE LENGTH	<u>65</u>	ft	NO. OF AXLES	<u>5</u>	

SELECT CODES FROM BACK COVER OF CRASH BOOKLET:

VEHICLE CONFIGURATION 5

CARGO BODY TYPE 4 LOAD TYPE 5

DRAC		PEVY	TRED	TRFC	WEAT	DRVA	VIS	VEHD	LGHT	COLL	MANY	PPA	JPL	TC002		X000041907																			
INVESTIGATING AGENCY														DAMAGE TO ANY ONE PERSON'S VEHICLE / PROPERTY		\$500 OR LESS \$501 - \$1,500 OVER \$1,500		TYPE OF REPORT		AGENCY CRASH REPORT NO.															
ISP		ADDRESS NO.												HIGHWAY or STREET NAME		770		MILE POST 131		COUNTY		CITY		TOWNSHIP		DATE OF CRASH		TIME		LARS CODE		LARS CODE			
25		FT / MI		N		E		S		W		(NAME OF INTERSECTION OR ROAD FEATURE)		CLARK		CASEY TWP		INTERSECTION RELATED		DATE OF CRASH		TIME		LARS CODE		LARS CODE		LARS CODE		LARS CODE					
AT INTERSECTION WITH		DRIVER		PAKED		DRIVERLESS		PED		PEDAL		EQUUS		MNV		MNV		DATE OF BIRTH		MAKE		MODEL		YEAR		DATE OF CRASH		TIME		LARS CODE		LARS CODE			
STREET ADDRESS		LAST / FIRST / MI		DATE OF BIRTH		SEX		SAFT		AIR		PLATE NO.		STATE		YEAR		DATE OF CRASH		MAKE		MODEL		YEAR		DATE OF CRASH		TIME		LARS CODE		LARS CODE			
CITY		STATE		ZIP		INJURY		ELECT		VIN		VEHICLE OWNER (LAST, FIRST MI.)		INSURANCE CO.		INSURANCE CO.		DATE OF CRASH		MAKE		MODEL		YEAR		DATE OF CRASH		TIME		LARS CODE		LARS CODE			
TELEPHONE		DRIVER LICENSE NO.		STATE		CLASS		VEHICLE OWNER (LAST, FIRST MI.)		INSURANCE CO.		INSURANCE CO.		DATE OF CRASH		TIME		LARS CODE		LARS CODE		LARS CODE		LARS CODE		LARS CODE		LARS CODE		LARS CODE		LARS CODE			
TAKEN TO		EMIS AGENCY		OWNER ADDRESS (STREET, CITY, STATE, ZIP)		TELEPHONE		POLICY NO.		TELEPHONE		POLICY NO.		TELEPHONE		POLICY NO.		TELEPHONE		POLICY NO.		TELEPHONE		POLICY NO.		TELEPHONE		POLICY NO.		TELEPHONE		POLICY NO.			
INJURY		SEAT		POB		SEX		SAFT		AIR		PLATE NO.		STATE		YEAR		DATE OF CRASH		MAKE		MODEL		YEAR		DATE OF CRASH		TIME		LARS CODE		LARS CODE			
PASSENGERS & WITNESSES ONLY		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)		(NAME / ADDRESS / TEL)					
CONTRIBUTORY CAUSE(S)		PRIMARY		SECONDARY		THIRD		FOURTH		FIFTH		SIXTH		SEVENTH		EIGHTH		NINTH		TENTH		ELEVENTH		TWELFTH		THIRTEENTH		FOURTEENTH		FIFTEENTH		SIXTEENTH			
DATE POLICE NOTIFIED		7/4/2017		02:44		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00			
COURT DATE		8/7/2017		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00			
COURT TIME		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00		09:00			
COURT JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE		JUDGE			
COURT CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK		CLERK			
COURT REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER		REPORTER			
COURT TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR		TRANSLATOR			
COURT VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO		VIDEO	
COURT PHOTO		PHOTO																																	

A Diagram and Narrative are required on all Type B crashes, even if units have been moved prior to the officer's arrival.

NARRATIVE (Refer to vehicle by Unit No.)

friction marks continued in a southeast direction until the east grass edging of I70. Unit #2 then traveled approximately 1379' in a south east direction, overturning on it's top. Unit #2 final resting position was on it's top. Road Stamp 210+00 was used as a reference point.

LOCAL USE ONLY

U	Color	U	Color
U	Towed by / to	U	Towed by / to

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3. Is designed to carry 15 or fewer passengers and operated by a contract carrier transporting employees in the course of their employment (example: employee transporter - usually a van-type vehicle or passenger car); or
4. Is used or designed to transport between 9 and 15 passengers, including the driver, for direct compensation (example: large van used for specific purpose); or
5. Is any vehicle used to transport any hazardous material (HAZMAT) that requires placarding (example: placards will be displayed on the vehicle).

CARRIER NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

USDOT NO. _____ ILCC NO. _____

Source of above info. ☐ Side of Truck ☐ Papers ☐ Driver ☐ Log Book
Gross Vehicle Weight Rating (GVWR) _____

Were HAZMAT placards displayed on the vehicle? ☐ Y ☐ N

If yes, name on placard _____
4-digit UN no. _____ 1-digit Hazard Class no. _____

Did HAZMAT spill from the vehicle (do not consider fuel from the vehicle's own tank)? ☐ Y ☐ N ☐ UNK

Did HAZMAT Regulations violation contribute to the crash? ☐ Y ☐ N ☐ UNK

Did Motor Carrier Safety Regulations (MCS) violation contribute to the crash? ☐ Y ☐ N ☐ UNK

Was a Driver/Vehicle Examination Report form completed? ☐ Y ☐ N ☐ UNK

HAZMAT ☐ Y ☐ N ☐ UNK Out of Service? ☐ Y ☐ N
MCS ☐ Y ☐ N ☐ UNK Out of Service? ☐ Y ☐ N

Form No. _____

IDOT PERMIT NO. _____ WIDE LOAD? ☐ Y ☐ N

TRAILER WIDTH(S): 0-96" 97-102" > 102"
TRAILER 1 ☐ ☐ ☐
TRAILER 2 ☐ ☐ ☐

TRAILER LENGTH(S): 1 ☐ ☐ ☐ TRAILER 2 ☐ ☐ ☐
TOTAL VEHICLE LENGTH ☐ ☐ ☐ NO. OF AXLES ☐ ☐ ☐

SELECT CODES FROM BACK COVER OF CRASH BOOKLET.

VEHICLE CONFIGURATION _____ CARGO BODY TYPE _____ LOAD TYPE _____